

COUNTY OF LOS ANGELES DEPARTMENT OF HUMAN RESOURCES

HEADOUARTERS

579 KENNETH HAHN HALL OF ADMINISTRATION • LOS ANGELES, CALIFORNIA 90012 (213) 974-2406 FAX (213) 621-0387

BRANCH OFFICE 3333 WILSHIRE BOULEVARD, SUITE 1000 • LOS ANGELES, CALIFORNIA 90010 (213) 738-2299 FAX (213) 637-0823

December 28, 2004

To:

Personnel Officers

From:

Subject:

SOCIAL SECURITY ACT OF 2004

Effective January 1, 2005, Section 419 (c) of Public Law 108-203, the Social Security Act of 2004, requires State and local government employers to disclose the potential impact of Social Security benefits on workers who also receive a pension based on their work or employment in a job not covered by Social Security such as the County of Los Angeles. Namely,

- The Windfall Elimination Provision can affect the amount of a worker's Social Security retirement or disability benefit; and
- The Government Pension Offset Provision can affect any possible Social Security benefit entitlement as a spouse or an ex-spouse.

Beginning January 1, 2005, newly hired County of Los Angeles employees must sign the Statement Concerning Your Employment in a Job Not Covered by Social Security (Form SSA-1945). This statement explains how their pension from County employment could affect their future Social Security benefits. It tells newly hired employees that there might be a possible reduction in their future Social Security benefit entitlement because they now work for a governmental agency that does not participate in Social Security. This new law does not present a change in employees' current County retirement benefits.

In order to comply with the Social Security Protection Act, your Human Resources Office must:

- Give a copy of the statement (Form SSA-1945) to each employee prior to the start of employment;
- Fill in the name of the employee and his/her County Identification Number;
- Have the employee sign and date the form; Copy the signed form and send that copy to LACERA;
- Place the original signed form in the employee's official Personnel Folder; and
- Include discussion of this law in your New Employee Orientation Program.

For your convenience, we have attached a copy of Form SSA-1945, a copy of the law, some explanatory material, and a New Employee Orientation Checklist.

Personnel Officers December 28, 2004 Page 2

At a later date, our office will determine if language concerning this new law must be included in job bulletins for disclosure to job applicants and inform you of our decision. In addition to this memorandum, we will issue formal instructions in the form of a Policy, Procedure, and Guideline (PP and G).

If you have any questions or need additional information, please call Tom Beggane of my staff at (213) 639-6736.

MJH:TJH LT:TPB

Attachments

Statement Concerning Your Employment in a Job Not Covered by Social Security

Employee Name	Employee ID#
Employer Name County of Los Angeles	Employer ID# 95-6000927
Department Name	Department #
you may receive a pension based on earnings from this j Social Security based on either your own work or the w your pension may affect the amount of the Social Securi	al Security. When you retire, or if you become disabled, job. If you do, and you are also entitled to a benefit from york of your husband or wife, or former husband or wife, ty benefit you receive. Your Medicare benefits, however, re are two ways your Social Security benefit amount may
modified formula when you are also entitled to a pension As a result, you will receive a lower Social Security be job. For example, if you are age 62 in 2005, the maximum result of this provision is \$313.50. This amount is updated	Security retirement or disability benefit is figured using a on from a job where you did not pay Social Security tax. nefit than if you were not entitled to a pension from this um monthly reduction in your Social Security benefit as a ted annually. This provision reduces, but does not totally ional information, please refer to the Social Security
become entitled will be offset if you also receive a Fe	locial Security spouse or widow(er) benefit to which you deral, State or local government pension based on work it reduces the amount of your Social Security spouse or ension.
two-thirds of that amount, \$400, is used to offset your eligible for a \$500 widow(er) benefit, you will receive \$Even if your pension is high enough to totally offset you	ed on earnings that are not covered under Social Security, Social Security spouse or widow(er) benefit. If you are \$100 per month from Social Security, \$500 - \$400=\$100. Four spouse or widow(er) Social Security benefit, you are formation, please refer to the Social Security publication,
	including information about exceptions to each provision, call toll free 1-800-772-1213, or, for the deaf or hard of et your local Social Security office.
I certify that I have received Form SSA-1945 that con Windfall Elimination Provision and the Government Security benefits.	ntains information about the possible effects of the Pension Offset Provision on my potential future Social
Signature of Employee	Date

Form SSA-1945 (1 1-2004) (Expires January, 2006)

Information about Social Security Form SSA-1945, Statement Concerning Your Employment in a Job Not Covered by Social Security

New legislation [Section 419(c) of Public Law 108-203, the Social Security Protection Act of 2004] requires State and local government employers to provide a statement to employees hired January 1, 2005 or later in a job not covered under Social Security. The statement explains how a pension from that job could affect future Social Security benefits to which they may become entitled.

Form SSA-1945, Statement Concerning Your Employment in a Job Not Covered by Social Security, is the document that employers should use to meet the requirements of the law. The SSA-1945 explains the potential effects of two provisions in the Social Security law for workers who also receive a pension based on their work in a job not covered by Social Security. The Windfall Elimination Provision can affect the amount of a worker's Social Security retirement or disability benefit. The Government Pension Offset Provision can affect any possible Social Security benefit entitlement as a spouse or an ex-spouse.

Employers must:

- Give the statement to the employee prior to the start of employment;
- Get the employee's signature on the form; and
- Submit a copy of the signed form to the pension paying agency.

Social Security will not be setting any additional guidelines for the use of this form.

Copies of the SSA-1945 are available online at the Social Security website, www.socialsecurity.gov/form1945. Paper copies can be requested by email at oplm.owsm.rqct.orders@ssa.gov, or by fax at 410-965-2037. The request must include the name, complete address and telephone number of the employer. Forms will not be sent to a post office box. Also, if appropriate, include the name of the person to whom the forms are to be delivered. The forms are available in packages of 25. Please refer to Inventory Control Number (ICN) 276950 when ordering.

Social Security Online

Social Security Form SSA-1945



If You Hire New Employees Not Covered by Social Security

What You Must Do

When you hire a new employee after January 1, 2005:

- Give Form SSA-1945, Statement Concerning Your Employment in a Job Not Covered by Social Security, to the new employee before employment begins.
- Have the employee sign the form.
- Submit a copy of the signed form to the pensionpaying agency.

How to Obtain Form SSA-1945

- You may obtain electronic copies of Form SSA-1945 and instructions for its use at www.socialsecurity.gov/form1945/SSA-1945.pdf
- Paper copies may be ordered via email at oplm.oswm.rgct.orders@ssa.gov or by fax at 410-965-2037. (Form SSA-1945 comes in packages of 25.)
 - You must include the employer name, complete address and telephone number. (We can not send forms to a post office box.)
 - o If appropriate, include the name of the person who will take delivery.
 - Ask for Inventory Control Number (ICN) 276950.

Additional Information

- Form SSA-1945 explains to your new employee the potential effects of two provisions in the Social Security law on workers who also receive a pension based on their work in a job not covered by Social Security:
 - o The Windfall Elimination Provision affects the amount of Social Security retirement or disability benefits, and
 - The Government Pension Offset Provision affects the amount of Social Security benefits received as a spouse or an ex-spouse.
- Social Security will not be setting any additional

guidelines for the use of this form.

What the Law Requires

Section 419(c) of Public Law 108-203, the Social Security Protection Act of 2004, requires State and local government employers to disclose the effect of the Windfall Elimination Provision and the Government Pension Offset to employees hired on or after January 1, 2005, in jobs **not** covered by Social Security. The law requires newly hired public employees to sign a statement that they are aware of a possible reduction in their future Social Security benefit entitlement.



Countywide New Employee Orientation Departmental Checklist

Employee Name	Employee Number
Department	Item Number

I hereby acknowledge that I have received the information listed in this document. If I have any questions or concerns, I may contact my supervisor or my departmental Personnel/HR Division.

concerns, i may contact my capervisor or my acparational re	7301111011111	C DIVIDIOII.	
Employee Signature	Date	Supervisor/Dept'l. Personnel/HR	Date

1	HIRING FORMS		SAVINGS BONDS
	WELCOME TO THE DEPARTMENT		CHARITABLE GIVING
	INSURANCE BENEFITS (Must complete		DISASTER PREPAREDNESS
	enrollment within 60 days of hire)	1	DEPARTMENT ORIENTATION
	BENEFICIARY INFORMATION		DEPARTMENT MISSION
	OPTION OF PERSONAL PHYSICIAN FOR I.A.		HISTORY OF DEPARTMENT
	SALARY, DIRECT DEPOSIT, FIRST PAYCHECK, PAYDAYS		STRUCTURE AND FUNCTION OF DEPARTMENT
	TAX DEDUCTION FORMS		RELATIONSHIP OF INDIVIDUAL JOB TO
	SOC. SEC. DISCLOSURE STATEMENT FORM SSA 1945		DEPARTMENT/COUNTY OPERATION
	WARRANT RECEIPT DESIGNATION FORM		DEPARTMENT CUSTOMERS
	EMPLOYMENT ELIGIBILITY VERIFICATION (1-9)		CUSTOMER SERVICE
,	EMPLOYEE INFORMATION FORM		
	EMERGENCY CONTACT		
	MAINTAINING CURRENT ADDRESS AND TELEPHONE NUMBER	1	PERFORMANCE/CONDUCT EXPECTATIONS
-	OUTSIDE EMPLOYMENT	u~ 4 -	PERFORMANCE EXPECTATIONS
-	CONFLICT OF INTEREST		PROBATION
	SEXUAL HARASSMENT POLICY		DRESS CODE (Standards, where applicable)
	DOMESTIC VIOLENCE AWARENESS	-	TELEPHONE PROCEDURES
	PARKING		INTERNET POLICIES
	RETIREMENT (To avoid default, forms must be filed within 60 days of hire)		DISCIPLINARY GUIDELINES
			PERFORMANCE EVALUATION SYSTEM
	SAVINGS PLANS		COUNTY OF LOS ANGELES EMPLOYEE HANDBOOK
	CREDIT UNIONS		

Department of Human Resources, County of Los Angeles

Rev. 12/04



Countywide New Employee Orientation Departmental Checklist

1	WORKSITE	1	DEPARTMENTAL SAFETY
	WORK SCHEDULE		SAFETY
	LUNCH AND BREAKS		REPORTING INJURY AND ILLNESS
	LOCATION OF RESTROOMS		RETURN TO WORK AND EARLY RETURN TO WORK
	TARDINESS POLICY		EMERGENCY PROCEDURES
	SICK LEAVE		TELECOMMUTING
	ATTENDANCE/ABSENCE POLICY		TRIP REDUCTION (INCL. TELECOMMUTING)
	VACATION POLICY		
	HOW TO REQUEST TIME OFF		
	CONFIDENTIALITY		
1,1	OVERVIEW OF DEPTL. PERSONNEL SERVICES	1	DEPARTMENTAL AWARDS (Optional)
	EMPLOYEE ORGANIZATIONS/MOUs/AGENCY SHOP/DUES*		PRODUCTIVITY AWARDS PROGRAM
			EMPLOYEE SUGGESTION AWARDS PROGRAM
			EMPLOYEE OF THE MONTH
			TUITION REIMBURSEMENT
	- C-1-1-1		
	-		
寸			